

## **Application Data Sheet**

### **APPLICATION INFORMATION**

Application Number::

Filing Date::

Application Type:: Regular

Subject Matter:: Utility

Suggested classification::

Suggested Group Art Unit::

CD-ROM or CD-R?: None

Number of CD Disks:

Number of Copies of CDs::

Sequence Submission?:

Computer Readable Form (CRF)?:: No

Number of Copies of CRF::

Title:: OPAQUE INK JET INK COMPOSITION

Attorney Docket Number:: 224713

Request for Early Publication?: No

Request for Non-Publication?: No

Suggested Drawing Figure::

Total Drawing Sheets::

Small Entity?: No

Latin Name::

Variety denomination name::

Petition Included?: No

Petition Type::

Licensed US Govt. Agency::

Contract or Grant Numbers::

Secrecy Order in Parent Appl.?: No

### **APPLICANT INFORMATION**

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Linfang  
Middle Name::  
Family Name:: ZHU  
Name Suffix::  
City of Residence:: Naperville  
State or Prov. of Residence:: IL  
Country of Residence:: US  
Street of mailing address:: 338 Meadow Green Drive

City of mailing address:: Naperville  
State or Province of mailing address:: IL  
Country of mailing address:: US  
Postal or Zip Code of mailing address:: 60565  
Inventor Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Fengfei  
Middle Name::  
Family Name:: XIAO  
Name Suffix::  
City of Residence:: Northbrook  
State or Prov. of Residence:: IL  
Country of Residence:: US  
Street of mailing address:: 2065 Cambria Court

City of mailing address:: Northbrook  
State or Province of mailing address:: IL  
Country of mailing address:: US  
Postal or Zip Code of mailing address:: 60062

## **CORRESPONDENCE INFORMATION**

Correspondence Customer Number:: 23460  
Phone:: (312) 616-5600  
Fax:: (312) 616-5700  
E-mail Address:: xp@leydig.com

## **REPRESENTATIVE INFORMATION**

Representative Customer Number:: 23460

Representative Designation::                      Registration Number::                      Representative Name::

## **DOMESTIC PRIORITY INFORMATION**

Application::                      Continuity Type::                      Parent Application::                      Parent Filing Date::

## **FOREIGN APPLICATION INFORMATION**

Country::                      Application Number::                      Filing Date::                      Priority Claimed

## **ASSIGNEE INFORMATION**

Assignee name:: Videojet Technologies Inc.,

Street of mailing address::

City of mailing address:: Wood Dale

State or Province of  
mailing address:: IL

Country of mailing  
address:: US

Postal or Zip Code of  
mailing address:: 60191-1073